STATE OF ARKANSAS BOARD OF REGISTRATION FOR PROFESSIONAL GEOLOGISTS

c/o Arkansas Geological Commission 3815 West Roosevelt Road Little Rock, Arkansas 72204 (501) 683-0150

FORM FOR PERSONAL REFERENCE

Your name has been listed by	
Please send your response directly to the Board and in associate, friend, banker, etc. We are particularly interby the applicant.	rested in the personal and ethical character demonstrate
RELATIONSHIP:	_
Do you have knowledge of the personal and ethical representation community?	
If yes, what is his/her reputation? Excellent	_ Good Fair Bad
Do you personally agree with that reputation? Yes	No (If not, please explain.)
Any additional comment you wish to make:	
Name (Please print) Address	Signature
City, State, Zip	Date